PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Application or Doctot Number  29,965023												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL			OR	OTHER SMALL	
TO	TAL CLAIMS	22	21_				TE	FEE		RATE	FEE	
FOR .			NUMBER	NUMBER FILED		NUMBER EXTRA		FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			22 m	22 minus 20=		• 2		9-		OR	X\$18=	36.
INDEPENDENT CLAIMS			4 "	4 minus 3 =				X40=		OR	X80=	80
MU	LTIPLE DEPEN	DENT CLAIM	PRESENT	RESENT				+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TO			OR		326	
	CLAIMS AS AMENDED - PART II										OTHER	
<u>2-</u>	2-1-05 (Column 1) (Column 2) (Column 3)							ALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN	7	NUM PREVI	HEST BER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
3	Total	٠ عع	Minus		2.2.	- <u> </u>	XS	9=		OR	X\$18=	
AME	Independent	· 5	Minus	***	4	- 1	X4	0=		OR	7880	200.
	FIRST PRESE	NTATION OF	MULTIPLE DI	EPENDEN	T CLAIM	ريسا	+13	)5=		OR	+270=	
	•							OYAL		OR	TOTAL ADDIT, FEE	200.
1]-	-8-05	(Column 1	Y	(Colu	mn 2)	(Column 3)	ADDIT	. FEE			AUUII, PEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMEN		Hig Nu PREV	HEST MBER MUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 11	Minus	• 2	22	•	XS	<b>9</b> =		OR	X\$18=	
	Independent FIRST PRESE	• NTATION OF	Minus		5	<u> </u>	X4	0=		OR	X80=	
	HAST PRESE	NIAHON OF	MOLTIPLE D	EPENDEN	T CCAL		+13	35=		OR	+270=	
							ADDIT	OTAL		OR	YOTAL ADDIT. FEE	
		(Column t	)	(Colu	ımn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMEN		HIG NU PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	••			XS	9=		OR	X\$18=	
	Independent		Minus	•••			X4	0=		OR	X80=	
L	FIRST PRESE	ENTATION OF	MULTIPLE D	EPENDEN	IT CLAIR		+1:	35=		OR	+270=	
	If the entry in colu If the T-Cichest Nu						<sub>.</sub> └¬	OYAL		OR	YOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

Application or Docket Number

PETITI	ON FOR EX	Docket No. 1809								
In Re Appl	ication Of: B	AUER		,		CENTRA	IL FAX CENTER			
							CiUS R N			
Application	n No. Fil	ling Date	Examiner			Group Art Unit	Confirmation No.			
09/965,	)23 09	9/27/2901	PHILLIPE, G.		278	2613				
Invention:	METIIOD A	nd device	FOR CODING AND DE	CODII	YG					
COMMISSIONER FOR PATENTS:										
of	Date									
	The requested extension is as follows (check time period desired):  One month  Two months  Five months									
from		BER 8, 2005								
The fee fo	The fee for the extension of time is \$120 and is to be paid as follows:  ☐ A check in the amount of the fee is enclosed.  ☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 194675  ☐ If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. 194675									
☑ The										
⊠ if ar any										
l wa	Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
-		ignagyri (			Dated: 11/0	08/2005				
	000060 194675 00 DA	09965023			deposited will sufficient post; addressed to Alexandria, VA	th the United State age as first class Commissioner for F 22313-4450" [37 C]	prrespondence is being as Postal Service with a mail to an envelope rateors, P.O. Box 1450, Fr(1.8(a)) on			
cc:						we of Person Mailing	Correspondence  Adding Correspondence			

PAGE 219 \* RCVD AT 11/8/2005 1:45:06 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/25 \* DNIS:2738300 \* CSID:1 631 549 0404 \* DURATION (mm-ss):01-32

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